IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the Matter of the Application of: Sasame et al.

Serial No.: New Filed: 7/30/2003

For: Electrical Connector

Examiner: Unknown

Group Art Unit: Unknown

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on July 30, 2003.

JoAnn F. Dillauxi JoAnn F. Dilloway

INFORMATION DISCLOSURE STATEMENT TRANSMITTAL LETTER

Sir:

An Information Disclosure Statement is submitted herewith pursuant to 37 CFR §§1.97-1.98. The enclosed statement is being filed within three months of the filing date of a national application, or within three months of the date of entry into the national stage as set forth in 37 CFR §1.491 in an international application, or before the mailing date of a first Office Action on the merits, whichever event occurs last.

Respectfully submitted,

Sasame et al., Applicants

Jennifer Mae Slonaker Registration No. 50568 Attorney for Applicants

Phone: 717.399.1535 Facsimile: 717.291.4660

FORM PT	O-1449 U.S.	DEPARTME	NT OF COMMERCE	Complete if Known		
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INFORMATION DISCLOSURE STATEMENT BY APPLICANT				First Named Inv ntor	Sasame et al.	
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Sheet	1	of	1	Attorney Docket Number	21334-1247	

U. S. PATENT DOCUMENTS							
Examiner Initials		Document Number	Date	Name	Class	Sub- Class	Filing Date
	AA						
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FOREIGN PATENT DOCUMENTS							
Examiner Initials		Document Number	Date	Country	Class	Sub- Class	TRNS Y/N
	AS	2,824,748	9/11/1998	Japan	H01R23/68		N
	AT						
	AU						
	AV			 			
	AW						

OTHER DOCUMENTS (Including Author, Title, Date, Pertinent Pages, Etc.)								
	AX							
	AY				,			
	AZ							

Examiner Signature	Date Considered	

EXAMINER: Initial if citation considered, whether or not citation is in conformance with MPEP 609; draw line through citation if not in conformance and not considered. Include copy of this form with next communication to Applicant.